PRESCOTT NURSING/REHABILITATION COMMUNITY

1505 ORRIN ROAD

PRESCOTT	54021	Phone: (715) 262-5661		Ownership:	Corporation
Operated from	1/1 To 12/31	Days of Operation:	365	Highest Level License:	Skilled
Operate in Cor	junction with	Hospital?	No	Operate in Conjunction with CBRF?	No
Number of Beds	Set Up and St	affed (12/31/05):	65	Title 18 (Medicare) Certified?	Yes
Total Licensed	Bed Capacity	(12/31/05):	65	Title 19 (Medicaid) Certified?	Yes
Number of Resi	dents on 12/31	/05:	27	Average Daily Census:	37

Age, Gender, and Primary Diagnosis	Length of Stay (12/31/05)	%			
Primary Diagnosis	8	 Age Groups 	*	 Less Than 1 Year 1 - 4 Years	29.6 40.7
Developmental Disabilities	0.0	Under 65	0.0	More Than 4 Years	29.6
Mental Illness (Org./Psy)	33.3	65 - 74	0.0	İ	
Mental Illness (Other)	0.0	75 - 84	22.2	İ	100.0
Alcohol & Other Drug Abuse	0.0	85 - 94	63.0		
Para-, Quadra-, Hemiplegic	3.7	95 & Over	14.8	Full-Time Equivalent	
Cancer	0.0			Nursing Staff per 100 Resid	lents
Fractures	0.0	İ	100.0	(12/31/05)	
Cardiovascular	18.5	65 & Over	100.0		
Cerebrovascular	11.1			RNs	11.1
Diabetes	0.0	Gender	%	LPNs	28.4
Respiratory	3.7			Nursing Assistants,	
Other Medical Conditions	29.6	Male	29.6	Aides, & Orderlies	42.8
		Female	70.4		
	100.0	İ		İ	
		İ	100.0	į	

Method of Reimbursement

		edicare			edicaid itle 19			Other			Private Pay	:		amily Care			anaged Care	l		
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	- Of
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	1	100.0	325	15	100.0	131	0	0.0	0	11	100.0	156	0	0.0	0	0	0.0	0	27	100.0
Intermediate				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depender	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	1	100.0		15	100.0		0	0.0		11	100.0		0	0.0		0	0.0		27	100.0

PRESCOTT NURSING/REHABILITATION COMMUNITY

Admissions, Discharges, and		Percent Distribution	ı of Residents'	Condit	ions, Services, an	d Activities as of 12/	31/05
Deaths During Reporting Period							
					% Needing		Total
Percent Admissions from:		Activities of	%	As	sistance of	% Totally	Number of
Private Home/No Home Health	33.3	Daily Living (ADL)	Independent	One	e Or Two Staff	Dependent	Residents
Private Home/With Home Health	2.9	Bathing	0.0		85.2	14.8	27
Other Nursing Homes	5.8	Dressing	0.0		85.2	14.8	27
Acute Care Hospitals	56.5	Transferring	11.1		77.8	11.1	27
Psych. HospMR/DD Facilities	0.0	Toilet Use	7.4		74.1	18.5	27
Rehabilitation Hospitals	1.4	Eating	77.8		11.1	11.1	27
Other Locations	0.0	*******	******	*****	*****	******	*****
Total Number of Admissions	69	Continence		%	Special Treatmen	ts	8
Percent Discharges To:		Indwelling Or Extern	al Catheter	7.4	Receiving Resp	iratory Care	11.1
Private Home/No Home Health	38.1	Occ/Freq. Incontinen	it of Bladder	63.0	Receiving Trac	heostomy Care	0.0
Private Home/With Home Health	31.0	Occ/Freq. Incontinen	it of Bowel	40.7	Receiving Suct	ioning	0.0
Other Nursing Homes	2.4	į			Receiving Osto	my Care	3.7
Acute Care Hospitals	4.8	Mobility			Receiving Tube	_	0.0
Psych. HospMR/DD Facilities	0.0	Physically Restraine	ed.	7.4	Receiving Mech	anically Altered Diets	18.5
Rehabilitation Hospitals	0.0	į -				-	
Other Locations	0.0	Skin Care			Other Resident C	haracteristics	
Deaths	22.6	With Pressure Sores		3.7	Have Advance D	irectives	51.9
Total Number of Discharges		With Rashes		0.0	Medications		
(Including Deaths)	84				Receiving Psyc	hoactive Drugs	59.3

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

***************	*****	*****	******	******	******	*****	*****	*****	*****
		Ownership:			Size:		ensure:		
	This	Pro	prietary	50	-99	Ski	lled	Al	
	Facility	Peer	Group	Peer	Group	Peer	Group	Faci	lities
	ે	%	Ratio	%	Ratio	%	Ratio	90	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	56.9	85.8	0.66	86.3	0.66	88.8	0.64	88.1	0.65
Current Residents from In-County	63.0	81.3	0.77	80.0	0.79	83.2	0.76	77.6	0.81
Admissions from In-County, Still Residing	8.7	16.8	0.52	18.8	0.46	18.7	0.46	18.1	0.48
Admissions/Average Daily Census	186.5	216.2	0.86	180.5	1.03	177.7	1.05	162.3	1.15
Discharges/Average Daily Census	227.0	217.8	1.04	178.7	1.27	179.2	1.27	165.1	1.37
Discharges To Private Residence/Average Daily Census	156.8	100.9	1.55	87.1	1.80	83.4	1.88	74.8	2.10
Residents Receiving Skilled Care	100	97.2	1.03	96.4	1.04	96.3	1.04	92.1	1.09
Residents Aged 65 and Older	100	91.5	1.09	93.5	1.07	91.3	1.10	88.4	1.13
Title 19 (Medicaid) Funded Residents	55.6	61.7	0.90	59.0	0.94	61.8	0.90	65.3	0.85
Private Pay Funded Residents	40.7	19.4	2.10	24.5	1.66	22.5	1.81	20.2	2.02
Developmentally Disabled Residents	0.0	0.9	0.00	0.8	0.00	1.1	0.00	5.0	0.00
Mentally Ill Residents	33.3	28.9	1.15	31.6	1.06	34.8	0.96	32.9	1.01
General Medical Service Residents	29.6	23.7	1.25	26.1	1.14	23.0	1.29	22.8	1.30
Impaired ADL (Mean)	48.9	47.9	1.02	47.8	1.02	48.4	1.01	49.2	0.99
Psychological Problems	59.3	59.1	1.00	57.6	1.03	59.5	1.00	58.5	1.01
Nursing Care Required (Mean)	4.6	7.1	0.65	7.0	0.66	7.2	0.64	7.4	0.62